PTO/SB/05 (08-03)
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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.	610-001				
First Inventor	Blount				
Title	Method of Chaning Eng.Oil				
Evamos Mail Label No	ER 24317753541				

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450				
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages 10] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS				
- Claim(s) - Abstract of the Disclosure					
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 6] 5. Oath or Declaration [Total Sheets] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and sup specification following the title, or in an Application Data Sheet under 3. Continuation Divisional Continual Prior application information: Examiner	tion-in-part (CIP) of prior application No.:				
	DENCE ADDRESS				
Customer Number:	OR Correspondence address below				
Name David W Barman					
Address 1101 NE 176 Terrace					
City North Miami Beach	State FL Zip Code 33162				
	elephone 305-332-4089 Fax				
Name (Print/Type) David W-Barry An Registration No. (Attorney/Agent) 47,225					
Signature W. M.	Date 09/22/2003				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, and gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments would be sent to the Chief Information Officer, U.S. Patent and Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS END TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date

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FEE TRANSMITTAI for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Signature

Complete if Known					
Application Number					
Filing Date	09/22/2003				
First Named Inventor	B'lount				
Examiner Name					
Art Unit					
Attorney Docket No.					

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)					
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Deposit Account		11	052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name — The Director is au	thorized to: (check all that apply)	11	053	130	1053	130	Non-English specification	
Charge fee(s) is		ents 1	812 2	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application		lication 1	804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		18	805 1	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	FEE CALCULATION	1:	251	110	2251	55	Extension for reply within first month	
1. BASIC FILIN		1:	252	410	2252	205	Extension for reply within second month	——
Large Entity Sma	II Entity		253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Code (\$) Cod	Fee Fee Description Fee P	Paid 1	254 1	1,450	2254	725	Extension for reply within fourth month	
	1 275 Utility Sling for	1	255 1	1,970	2255	985	Extension for reply within fifth month	
1	2 165 Design filing fee		401	320	2401	160	Notice of Appeal	
1003 520 200	* · · L	 1.	402	320	2402	160	Filing a brief in support of an appeal	
1004 750 200	4 375 Reissue filing fee	1 ₁ ,	403	280	2403	140	Request for oral hearing	
1005 160 200	05 80 Provisional filing fee		451 1	1,510	1451	1,510	Petition to institute a public use proceeding	
1	SUBTOTAL (1) (\$) 37 ;	<u> </u>	452	110	2452	55	Petition to revive - unavoidable	
		1	453 1	1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLA	AIM FEES FOR UTILITY AND REIS	SUE	501 1	1,300	2501	650	Utility issue fee (or reissue)	
l	Extra Claims below Fee	Paid 1	502	470	2502	235	Design issue fee	
Total Claims Independent	-20** = X	==- 1	503	630	2503	315	Plant issue fee	
Claims L	3** =	╼╣╹	460	130	1460	130	Petitions to the Commissioner	
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	mall Entity ree Fee Fee Description	11	806	180	1806		Submission of Information Disclosure Stmt	
Code (\$)	code (\$) 2202 9 Claims in excess of 20	8	021	40	802	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 1201 84	2201 42 Independent claims in excess o	f3 1	809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280	2203 140 Multiple dependent claim, if not	paid 1	810	750	2810	375	For each additional invention to be	
1204 84	2204 42 ** Reissue independent claims	- 1	1001	750	2004	075	examined (37 CFR 1.129(b))	
1	over original patent		1801	750	2801 1802		Request for Continued Examination (RCE) Request for expedited examination	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			1802	900	l	500	of a design application	
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**or number previously paid, if greater; For Reissues, see above		ove	Kedu	cea by	Basic	riling F	ee Paid SUBTOTAL (3) (\$)	ليبيا
SUBMITTED BY (Complete (if applicable))								
Name (Print/Type)	David W Barman			egistra ttomevi	tion No	. 4	7225 Telephone 305-332-	4089

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